

***IN THE UNITED STATES PATENT AND TRADEMARK OFFICE***

Applicant: Toshiaki OUCHI et al.  
Title: SHEET FEEDER IN IMAGE FORMING APPARATUS  
Appl. No.: Unassigned  
Filing Date: October 29, 2003  
Examiner: Unknown  
Art Unit: Unknown

**UTILITY PATENT APPLICATION**  
**TRANSMITTAL**

Mail Stop PATENT APPLICATION  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Toshiaki OUCHI  
Masashi AKIYAMA

Enclosed are:

- [ X ] Japanese Language Specification, Claim(s), and Abstract (10 pages).
- [ X ] Formal drawings (3 sheets, Figures 1-3).
- [ X ] Declaration and Power of Attorney (4 pages).
- [ X ] Assignment of the invention to KABUSHIKI KAISHA TOSHIBA and TOSHIBA TEC KABUSHIKI KAISHA.
- [ X ] Assignment Recordation Cover Sheet.
- [ X ] Information Disclosure Statement.
- [ X ] Form PTO/SB/08 with copies of 3 listed reference(s).
- [ X ] Application Data Sheet (37 CFR 1.76).



The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$770.00	\$770.00
Total	10	- 20	= 0	x \$18.00	= \$0.00
Claims:					
Independent	2	- 3	= 0	x \$86.00	= \$0.00
ents:					
If any Multiple Dependent Claim(s) present:				+ \$290.00	= \$0.00
				SUBTOTAL:	= \$770.00
[ ] Small Entity Fees Apply (subtract ½ of above):					= \$0.00
				TOTAL FILING FEE:	= \$770.00
Assignment Recordation Fee:				+ \$40.00	= \$40.00
Processing Fee under 37 CFR 1.17(i) for Late				+ \$130.00	= \$130.00
Filing of English Translation of Application:					
				TOTAL FEE	= \$940.00

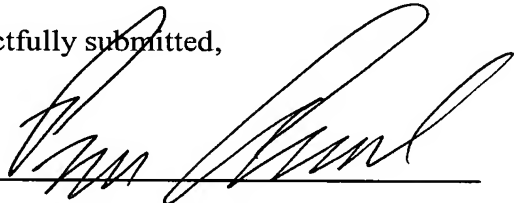
- [ X ] A check in the amount of \$940.00 to cover the filing fee, fee for late filing of translation and fee for recordation of Assignment is enclosed.
- [ X ] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date October 29, 2003

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By 

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